### FOR INSTRUCTIONS, SEE BACK OF FORM

## DISCLOSURE SUMMARY PAGE

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12<sup>th</sup>, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.



2010 DEC 21 AM 8: 49

COMMITTEE NAME (Must be same as on Statement of Organization)		
	FORM	
IMPORTANT: Indicate by # type of committee you are reporting for:  (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political	or Other Delistent	DISCLOSURE REPORT
11) Local Ballot Issue		
CANDIDATE COMMITTEES ONLY:	Logged In	
Candidate Name Political Party (	if applicable)     Scanned	
LaVonne Bjergum  Office Sought  District (if Sona		
Winneshiek County Recorder		
Late reports are subject to possible civil and criminal penalties. Pursuant to lowa Code se candidate's committee, and the chairperson, for any other type of committee, is the individ	octions 68B.32A(7) and 68A.401(3), the ca	ndidate, for a
	sauti to postable for filling afficing and accur-	ate reports.
SIGNATURE OF PERSON FILING REPORT TELEP	PHONE DATES	2010
SIGNATURE OF PERSON FILING REPORT TELEP	HONE DATES	GIGNED
I AM FILING A 12-19-2010 REPORT FOR	(1) ELECTION /(2)NON-ELECTION YE	40
(report date)	Indicate by #	AK.
CHECK IF AMENDMENT TO REPORT DATED	Local Committees, enter Da	ate of Election
Charle if this is faul the matter to	1/ 1 20	
Check if this is final (termination) report and attach Notice of Dissolution Form Df (You must continue to file reports until a DR-3 is filed.)	County & Local Committees	s, enter County in
( and a state of the state of t	which Election is held	•
STATEMENT OF CASH ON HAND	WITH LANGE	
*** - ** - ** - **		
CASH ON HAND at the beginning of the reporting period. (Total of all funds held by committee. This amount MUST be the same as the cash on hand at the e of the last reporting period or must be zero if this is first report filed.)	nd	-o <del>-</del>
ADD TOTAL MONEY TAKEN IN THIS PERIOD		_
Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kii	nd below)	50 00
Schedule F: Loans Received total (Attach Schedule F)		0_
Schedule H: Total Sales of Campaign Property (Attach Schedule H)		0—
(Schedule H applies to Candidates' Committees Only)		
SI	JB-TOTAL\$	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		18
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and	loans below)	
Schedule F: Loan Repayments total (Attach Schedule F)		o —
CASH ON HAND at the end of this reporting period (if final report balance must be z	ero)\$	0 —
**UNPAID BILLS (From Schedule D - Attach Schedule D)	\$	
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)		
OUTSTANDING LOANS (From Schedule F - Attach Schedule F)		
CONSULTANT BREAKDOWN (Schedule G Attached?)		NO
CANDIDATE COMMITTEES ONLY:		
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	
STATE COMMITTEES: Submit a reconciled campaign account bank statement in 1		

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#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)	(Rev. 07/03)	RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)		CK THIS BOX IF NDING FORM
	L	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE	DAG ID MUMBED				
RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER
	NUMBER				INCOME
10/26/	ID#	Winneshiek Co. Klp. Centr. Com	n,	\$ 4500	
/10	CK# 1063	Winneshiek Co. Rep. Centr. Comm 208. E Pearl St., Decruh. IA 52101		\$ 250°	<u>                                   </u>
	ID#		•		
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				\$	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page of for Schedule A)

TOTAL (if last page of this schedule)

SCHEDULE

MONETARY

FOR INSTRUCTIONS, SEE BACK OF FORM

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# EXPENDITURES -- MONEY SPENT FROM GOMMITTEE ACCOUNT

SCHEDULE

B MONETARY
(Rev. 07/03) EXPENDITURES

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9/22/10	ID# CK# <b>8188</b>	Letterwerks	Yard Signs	s468 13
9/30/10	ID# CK# <i>8191</i>	Wennes Communications	Radio Ads	366 00
10/10	CK# 8800	KOEC	Radio Ads	15300
10/1/0	CK# 8801	Calmor Courier	Political Ads	4809
10/11/0	ID# CK# 8802	Cresoo Shopper	Political Ads	10200
10/4/10	ID# CK# 8805	Ossten Bo	Political Ads	8550
11/5/10	ID# CK# 8840	Decorah Newspaper	Thankyou Ad	1995
11/8/	ID# CK# 8844	Calmar Courier	Thankyou Ad	560
			SUB-TOTA	S/248,18

HIS BOX APPLIES TO	CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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TOTAL (if last page of this schedule)

FOR INSTRUCTIONS, SEE BACK OF FORM

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# EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

DATE EXPENDED (Industry) EXPENDED (Industry) AND PAC CHECK NUMBER  11/16/ 10# CK# 1D# CK# CK#  CK# CK# CK# CK# CK# CK# CK# C				TOTAL (if last page of this schedule)	\$1796 18
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DATE EXPENDED IN NUMBER (# applicable) (MM/DD/YR)  AND PAC CHECK NUMBER  ID#  CK#		CK#			
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DATE EXPENDED (if applicable) AND PAC CHECK NUMBER  ID NUMBER (if applicable) AND PAC CHECK NUMBER  ID#  CK# 8852  ID#  CK#					
DATE EXPENDED (if applicable) AND PAC CHECK NUMBER    1/16/		ID#			
DATE EXPENDED (if applicable) AND PAC CHECK NUMBER (If applicable) AND PAC CHECK NUMBER (Disbursement) WAS MADE    11/16/		CK#			
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DATE EXPENDED (if applicable) AND PAC CHECK NUMBER    ID#   CK# 8852   OSSI'an Bee   ID#   CK#   ID#   CK#   ID#   CK#   ID#   ID#   CK#   ID#   ID#   CK#   ID#		ID#			
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DATE EXPENDED (if applicable) (MM/DD/YR) AND PAC CHECK NUMBER (Disbursement) WAS MADE (DISBURSEMENT) W		ID#			
DATE EXPENDED (if applicable) (Disbursement) WAS MADE	1/16/	CK# 8852	Ossian Bee	thank you Ad	\$ 3800
DATE ID NUMBER EXPENDITURE (DESCRIBE TRANSACTION)  EXPENDED (if applicable) (Disbursement) WAS MADE  (MM/DD/YR) AND PAC CHECK	#1/11				<u> </u>
	EXPENDED	(if applicable) AND PAC CHECK			
	COMMITTE	E NAME (Must be :	same as on Statement of Organization)		

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